



Attorney's Docket No.: 10284-077001
Client's Ref. No.: MGH 2236

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled ZEBRAFISH ASSAY, the specification of which:

- ☐ is attached hereto.
☒ was filed on September 29, 2003 as Application Serial No. 10/605,415 and was amended on _____.
☐ was described and claimed in PCT International Application No. _____ filed on _____ and as amended under PCT Article 19 on _____.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim the benefit under Title 35, United States Code, §119(e)(1) of any United States provisional application(s) listed below:

<u>U.S. Serial No.</u>	<u>Filing Date</u>	<u>Status</u>
60/427,753	11/20/2002	Expired

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Louis Myers, Reg. No. 35,965
Timothy A. French, Reg. No. 30,175
John W. Freeman, Reg. No. 29,066

Leda Trivinos, Reg. No. 50,635
Laurie Butler Lawrence, Reg. No. 46,593
Ramon Tabtiang, Reg. No. P-55,658

Direct all telephone calls to Louis Myers at telephone number (617) 542-5070.

Direct all correspondence to the following:


PTO Customer Number

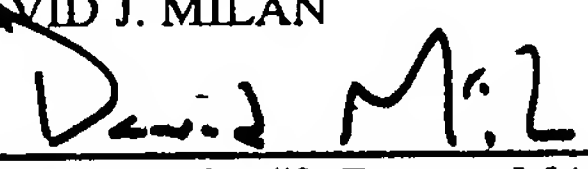
26161


I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.


Combined Declaration and Power of Attorney

Page 2 of 2 Pages

Full Name of Inventor: CALUM A. MACRAE
Inventor's Signature:  Date: 1/23/04
Residence Address: 142 Truman Road, Newton Center, MA 02459
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Inventor's Signature:  Date: 1/23/04
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Inventor's Signature:  Date: 1/23/04
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Full Name of Inventor: RANDALL PETERSON
Inventor's Signature:  Date: 1/23/04
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Full Name of Inventor: TRAVIS PETERSON
Inventor's Signature: _____ Date: _____
Residence Address: 25 W. 200 Highview, Naperville, IL 60563
Citizenship: USA
Post Office Address: 25 W. 200 Highview, Naperville, IL 60563



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Combined Declaration and Power of Attorney

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Full Name of Inventor: CALUM A. MACRAE

Inventor's Signature:

Date: _____

Residence Address: 142 Truman Road, Newton Center, MA 02459

Citizenship: United Kingdom

Post Office Address: 142 Truman Road, Newton Center, MA 02459

Full Name of Inventor: DAVID J. MILAN

Inventor's Signature:

Date: _____

Residence Address: 396 Beacon St. #3, Boston, MA 02116

Citizenship: USA

Post Office Address: 396 Beacon St. #3, Boston, MA 02116

Full Name of Inventor: C. GEOFFREY BURNS

Inventor's Signature:

Date: _____

Residence Address: 34 Sheafe St. #1, Boston, MA 02113

Citizenship: USA

Post Office Address: 34 Sheafe St. #1, Boston, MA 02113

Full Name of Inventor: RANDALL PETERSON

Inventor's Signature:

Date: _____

Residence Address: 42 Perkins St., Stoneham, MA 02180

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Full Name of Inventor: TRAVIS PETERSON

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Residence Address: 25 W. 200 Highview, Naperville, IL 60563

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